

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

CALIFORNIA
2001/02
FORM

460

Page 1 of 164

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period

from 10/21/2018

through 12/31/2018

Date of election if applicable:
(Month, Day, Year)

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☐ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall

(Also Complete Part 5.)

- ☒ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☒ Political Party/Central Committee

- ☐ Ballot Measure Committee
☐ Primary Formed
☐ Controlled
☐ Sponsored

(Also Complete Part 6.)

- ☐ Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.)

2. Type of Statement:

- ☐ Pre-election Statement
☒ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)

- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
742051

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
San Francisco Democratic County Central Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Francisco</u>	<u>CA</u>	<u>94111</u>	

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS

(415) 543-3305 / sowens@seowenscompany.com

Treasurer(s)

NAME OF TREASURER
Alysabeth Alexander

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Francisco</u>	<u>CA</u>	<u>94111</u>	<u>(415) 626-1161</u>

NAME OF ASSISTANT TREASURER, IF ANY
Stacy Owens

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Francisco</u>	<u>CA</u>	<u>94114</u>	<u>(510) 423-4300</u>

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/14/2019 By Stacy Owens
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee
Campaign Statement
Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page 3 of 164
I.D. NUMBER 742051		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Francisco Democratic County Central Committee

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$311,050.00	\$605,541.00
2. Loans Received	Schedule B, Line 7	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$311,050.00	\$605,541.00
4. Nonmonetary Contributions	Schedule C, Line 3	\$0.00	\$0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$311,050.00	\$605,541.00

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$399,273.36	\$702,219.91
7. Loans Made	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$399,273.36	\$702,219.91
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	(\$64,939.59)	\$13,030.69
10. Nonmonetary Adjustment	Schedule C, Line 3	\$0.00	\$0.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$334,333.77	\$715,250.60

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$148,524.98	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts	Column A, Line 3 above	\$311,050.00	
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$0.00	
15. Cash Payments	Column A, Line 8 above	\$399,273.36	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$60,301.62	
If this is a termination statement, Line 16 must be zero.			
17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$0.00	

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$13,030.69

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 4 of 164
		I.D. Number 742051

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Francisco Democratic County Central Committee

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/1/2018	New Deal Advisers San Francisco, CA 94108 Memo Reference: INC34899	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$5,000.00	
10/29/2018	American Federation of State, County And Municipal Employees, AFL-CIO (MPO) Sacramento, CA 95814 Committee ID: 745604	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$36,500.00	\$36,500.00	
10/30/2018	Another Planet Entertainment Berkeley, CA 94710	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$5,000.00	
10/29/2018	Anresco, Inc. San Francisco, CA 94124	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	
11/5/2018	AT&T California Employee Political Action Committee San Francisco, CA 94108 Committee ID: 981470	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$7,500.00	

SUBTOTAL

Schedule A Summary

1. Amount received this period - contributions of \$100 or more.

(Include all Schedule A subtotals.) \$311,050.00

2. Amount received this period - unitemized contributions of less than \$100 \$0.00

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL** \$311,050.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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through	12/31/2018	Page 5 of 164

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NAME OF FILER

San Francisco Democratic County Central Committee

I.D. Number
742051

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/3/2018	Bay Area Citizens PAC Emeryville, CA 94608 Committee ID: 1346828	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	
10/30/2018	California Barrel Company, LLC San Francisco, CA 94107	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,000.00	\$3,000.00	
10/30/2018	California Democratic Party Sacramento, CA 95811 Committee ID: 741666	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$15,000.00	
11/8/2018	California Democratic Party Sacramento, CA 95811 Committee ID: 741666	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$15,000.00	
10/24/2018	California State Council of Service Employees Small Contributor Committee Sacramento, CA 95814 Committee ID: 831628	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$36,500.00	\$36,500.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER

San Francisco Democratic County Central Committee

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	Clark Neubert LLP San Francisco, CA 94105	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	
10/29/2018	Michael K. Clifton San Francisco, CA 94123	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Presidio View Capital Managing Director	\$100.00	\$100.00	
11/14/2018	Coalition for Affordable Housing Los Angeles, CA 90024 Committee ID: 1399958	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$5,000.00	
10/23/2018	David Chiu for Assembly 2018 San Francisco, CA 94104 Committee ID: 1393047	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$3,250.00	
10/30/2018	Dignity California SEIU Local 2015 Los Angeles, CA 90057 Committee ID: 1357256	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00	\$10,000.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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San Francisco Democratic County Central Committee

I.D. Number

742051

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	Christopher R. Emerson San Francisco, CA 94123	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Level Owner	\$500.00	\$500.00	
12/4/2018	Fiona Ma for State Treasurer 2018 Sacramento, CA 95864 Committee ID: 1384474	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$5,000.00	
10/29/2018	Aaron Flynn San Francisco, CA 94121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Gold Seal San Francisco Owner	\$500.00	\$500.00	
11/1/2018	Folsom Forge LLC San Francisco, CA 94105	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	
10/29/2018	Ussama Freij Daly City, CA 94014	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Anresco, Inc. Owner	\$500.00	\$500.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
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San Francisco Democratic County Central Committee

I.D. Number

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10/29/2018	Miguel Galarza San Francisco, CA 94124	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Yerba Buena Engineering Engineer	\$500.00	\$500.00	
11/2/2018	Gordon Mar for District 4 Supervisor San Francisco, CA 94117 Committee ID: 1406921	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,500.00	\$4,500.00	
10/29/2018	John G. Hanley San Francisco, CA 94123	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Filigreen Salesperson	\$500.00	\$500.00	
10/30/2018	HealthPlus Shared Services Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$5,000.00	
11/2/2018	Anne Irwin San Francisco, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Attorney	\$5,000.00	\$5,000.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>10/21/2018</u>		CALIFORNIA FORM 460
through <u>12/31/2018</u>		
		Page <u>9</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. Number 742051

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/6/2018	Jonathan Lyens for BART Board District 8 2018 San Francisco, CA 94114 Committee ID: 1398181	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	
10/31/2018	Lighthouse Public Affairs, LLC San Francisco, CA 94133	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00	\$10,000.00	
10/29/2018	Arion Luce Sebastapol, CA 95472	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Apothecarium Partner	\$250.00	\$250.00	
10/29/2018	Patrick Mulligan San Francisco, CA 94127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City and County of San Francisco, Office of Labor Standards and Enforcement Director	\$200.00	\$200.00	
11/2/2018	National Union of Healthcare Workers Candidate Committee Sacramento, CA 95815 Committee ID: 1318200	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$20,600.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER San Francisco Democratic County Central Committee	I.D. Number 742051
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/1/2018	Neutron Holdings, Inc. San Mateo, CA 94403	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$5,000.00	
11/7/2018	Re-Elect Thea Selby for the San Francisco Community College Board 2018 San Francisco, CA 94012 Committee ID: 1398961	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$1,525.00	
11/1/2018	San Francisco Labor Council Labor & Neighbor San Francisco, CA 94109 Committee ID: 970630	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00	\$12,000.00	
11/16/2018	San Francisco Labor Council Labor & Neighbor San Francisco, CA 94109 Committee ID: 970630	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$12,000.00	
10/30/2018	Service Employees International Union (SEIU) Local 2015 State Political Action Committee Los Angeles, CA 90057 Committee ID: 1374983	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$36,500.00	\$36,500.00	
SUBTOTAL						

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OTH - Other
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
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10/23/2018	Service Employees International Union Local 1021 Candidate PAC Small Contributor Committee Sacramento, CA 95814 Committee ID: 1296948	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$30,000.00	\$50,000.00	
11/5/2018	Seven Hills Properties, LLC San Francisco, CA 94107	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$8,500.00	\$18,500.00	
10/23/2018	Shamann Walton for Supervisor 2018 San Francisco, CA 94104 Committee ID: 1395470	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	
10/29/2018	Anthony Shira San Francisco, CA 94114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Apothecarium Partner	\$500.00	\$500.00	
10/24/2018	State Building and Construction Trades Council of California PAC Sacramento, CA 95814 Committee ID: 743501	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$36,500.00	\$36,500.00	

SUBTOTAL

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 10/21/2018 through 12/31/2018		CALIFORNIA FORM 460 Page 12 of 164
I.D. Number 742051		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Francisco Democratic County Central Committee

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/5/2018	TXT LLC DBA Cat Club San Francisco, CA 94013	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,000.00	\$3,000.00	
10/23/2018	U.A. Local 38 COPE Fund San Francisco, CA 94103 Committee ID: 746875	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	
10/23/2018	United Educators Of San Francisco Candidate PAC San Francisco, CA 94133 Committee ID: 1311218	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00	\$51,000.00	
12/6/2018	United Food & Commercial Workers Local 5 PAC San Jose, CA 95113 Committee ID: 1294035	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	
10/22/2018	Yerba Buena Commons Associates, Inc. San Francisco, CA 94107	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$20,000.00	
SUBTOTAL						

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>10/21/2018</u>		CALIFORNIA FORM 460
through <u>12/31/2018</u>		
		Page <u>13</u> of <u>164</u>
		I.D. Number 742051

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Francisco Democratic County Central Committee

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2018	Yerba Buena Commons Associates, Inc. San Francisco, CA 94107	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$20,000.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL				\$311,050.00		

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 10/21/2018
through 12/31/2018

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	

SUBTOTALS

Schedule B Summary

1. Loans received this period. _____
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period _____
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) _____ **Net** _____
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B - Part 2

Loan Guarantors

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from <u>10/21/2018</u> through <u>12/31/2018</u>	CALIFORNIA FORM 460
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I.D. Number 742051	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
SUBTOTAL					Enter on Summary Page, Line 17 only.	

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>10/21/2018</u> through <u>12/31/2018</u>	CALIFORNIA FORM 460
	Page <u>16</u> of <u>164</u>
I.D. Number 742051	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes
IND - Individual
COM- Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule D

Summary of Expenditures

Supporting/Opposing Other

Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period

from 10/21/2018

through 12/31/2018

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Francisco Democratic County Central Committee

I.D. NUMBER

742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/31/2018	Payee Name: Friends of Joy Silver for Senate 2018 Candidate Name: Joy Silver State Senator District 28 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$45,000.00	\$45,000.00	2018G: \$45,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/31/2018	Payee Name: Hurtado for Senate 2018 Candidate Name: Melissa Hurtado State Senator District 14 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$70,000.00	\$70,000.00	2018G: \$70,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/31/2018	Payee Name: Tom Umberg for Senate 2018 Candidate Name: Tom Umberg State Senator District 34 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$15,000.00	\$15,000.00	2018G: \$15,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$285,034.77
- Unitemized contributions and independent expenditures made this period of under \$100 \$0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL** \$285,034.77

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 18 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$313.75	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$313.75	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$313.75	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$313.75	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>19</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$313.75	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$313.75	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$313.75	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$659.91	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018	through 12/31/2018	
Page 20 of 164		I.D. NUMBER 742051

NAME OF FILER
San Francisco Democratic County Central Committee

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$659.91	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Re-Elect Fiona Ma for State Board of Equalization 2018 Candidate Name: Fiona Ma Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$659.91	\$659.91	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$941.21	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/22/2018	Affordable Housing Now - Yes on Props 1&2 coalition: Housing California, California Housing Consortium, State Building and Co Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$84.07	\$971.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>21</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$84.07	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$84.07	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/22/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$84.07	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$84.07	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

CALIFORNIA
FORM 460

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NAME OF FILER

San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	CA Prop 10 - G2018 Expands Local Governments' Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$84.07	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$84.07	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/22/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$84.07	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$494.80	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>23</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$282.06	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$347.81	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$693.98	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$347.81	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page 24 of 164

NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$347.81	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$347.81	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$383.71	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$383.71	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>25</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$729.88	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$325.56	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$325.56	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$282.06	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
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NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$628.23	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$504.14	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$504.14	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$504.14	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 27 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject ot Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$478.04	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/22/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$478.04	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Fiona Ma - Treasurer - 2018 Candidate Name: Fiona Ma State Treasurer Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,261.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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through <u>12/31/2018</u>		Page <u>29</u> of <u>164</u>

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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period

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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Affordable Housing Now - Yes on Props 1&2 coalition: Housing California, California Housing Consortium, State Building and Co Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$971.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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 Amounts may be rounded
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SCHEDULE D (CONT.)

Statement covers period

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10/23/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/23/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	CA Prop 10 - G2018 Expands Local Governments' Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/23/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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10/23/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

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10/23/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 35 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

CALIFORNIA
FORM 460

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NAME OF FILER

San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject ot Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$42.19	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$9,470.09	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

**CALIFORNIA
FORM 460**

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NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$26.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$26.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$26.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Fiona Ma - Treasurer - 2018 Candidate Name: Fiona Ma State Treasurer Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$26.40	\$2,261.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
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SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

**CALIFORNIA
FORM 460**

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NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$26.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$26.40	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$26.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$26.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>39</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$26.40	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$26.40	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$27.87	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Affordable Housing Now - Yes on Props 1&2 coalition: Housing California, California Housing Consortium, State Building and Co Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$27.87	\$971.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>40</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$27.87	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$27.87	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/23/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$27.87	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$27.87	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page 41 of 164

NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	CA Prop 10 - G2018 Expands Local Governments' Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$27.87	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$27.87	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/23/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$27.87	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$27.87	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
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NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$39.11	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$11,143.09	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$32.27	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$32.27	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

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FORM 460

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NAME OF FILER

San Francisco Democratic County Central Committee

I.D. NUMBER
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$32.27	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$32.27	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$39.11	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$39.11	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$39.11	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$44.00	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$44.00	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$39.11	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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10/23/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$39.11	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$29.34	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$29.34	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$29.34	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
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10/23/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject ot Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$29.34	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/23/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$29.34	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$414.26	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$414.26	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

CALIFORNIA
FORM 460

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NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$414.26	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Fiona Ma - Treasurer - 2018 Candidate Name: Fiona Ma State Treasurer Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$414.26	\$2,261.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$414.26	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$414.26	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
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NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$414.26	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$414.26	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$414.26	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$414.26	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page 49 of 164

NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$745.04	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Affordable Housing Now - Yes on Props 1&2 coalition: Housing California, California Housing Consortium, State Building and Co Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$144.91	\$971.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$144.91	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$144.91	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$144.91	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$144.91	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	CA Prop 10 - G2018 Expands Local Governments&146; Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$144.91	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$144.91	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

**CALIFORNIA
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NAME OF FILER

San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$144.91	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$1,505.80	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/24/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$396.93	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$447.34	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 52 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$447.34	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$447.34	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$447.34	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$447.34	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
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NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$459.94	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$459.94	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$459.94	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$345.74	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
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SCHEDULE D (CONT.)

Statement covers period

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NAME OF FILER
San Francisco Democratic County Central Committee

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742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$345.74	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$396.93	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$396.93	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$745.04	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$745.04	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$745.04	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject ot Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$745.04	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/24/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$745.04	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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SCHEDULE D (CONT.)

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10/26/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Fiona Ma - Treasurer - 2018 Candidate Name: Fiona Ma State Treasurer Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,261.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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SCHEDULE D (CONT.)

Statement covers period

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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Affordable Housing Now - Yes on Props 1&2 coalition: Housing California, California Housing Consortium, State Building and Co Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$971.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page 59 of 164

NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/26/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
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NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2018	CA Prop 10 - G2018 Expands Local Governments' Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/26/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
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 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>61</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>62</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

**CALIFORNIA
FORM 460**

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NAME OF FILER

San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 64 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject of Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

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FORM 460

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NAME OF FILER
San Francisco Democratic County Central Committee

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742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.99	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$9,111.82	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

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NAME OF FILER
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Fiona Ma - Treasurer - 2018 Candidate Name: Fiona Ma State Treasurer Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,261.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Affordable Housing Now - Yes on Props 1&2 coalition: Housing California, California Housing Consortium, State Building and Co Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$971.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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10/29/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	CA Prop 10 - G2018 Expands Local Governments&146; Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

**CALIFORNIA
FORM 460**

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NAME OF FILER

San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/29/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 71 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>72</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>73</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 74 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject ot Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.16	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$8,919.19	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

CALIFORNIA
FORM 460

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NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Fiona Ma - Treasurer - 2018 Candidate Name: Fiona Ma State Treasurer Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,261.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 76 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>77</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Affordable Housing Now - Yes on Props 1&2 coalition: Housing California, California Housing Consortium, State Building and Co Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$971.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
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NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/30/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
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to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

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**CALIFORNIA
FORM 460**

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NAME OF FILER
San Francisco Democratic County Central Committee

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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	CA Prop 10 - G2018 Expands Local Governments' Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/30/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
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SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

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FORM 460

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NAME OF FILER

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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/30/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
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NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>82</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 83 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject of Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 84 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$37.40	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$9,035.10	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>85</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Fiona Ma - Treasurer - 2018 Candidate Name: Fiona Ma State Treasurer Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,261.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

CALIFORNIA
FORM 460

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NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

CALIFORNIA
FORM 460

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NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/30/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Affordable Housing Now - Yes on Props 1&2 coalition: Housing California, California Housing Consortium, State Building and Co Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$971.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
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NAME OF FILER
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/30/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	CA Prop 10 - G2018 Expands Local Governments' Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

**CALIFORNIA
FORM 460**

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NAME OF FILER

San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/30/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
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NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject ot Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
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NAME OF FILER
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I.D. NUMBER
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

CALIFORNIA
FORM 460

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NAME OF FILER

San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$43.10	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$10,409.59	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 94 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Fiona Ma - Treasurer - 2018 Candidate Name: Fiona Ma State Treasurer Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,261.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

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NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/30/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Affordable Housing Now - Yes on Props 1&2 coalition: Housing California, California Housing Consortium, State Building and Co Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$971.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

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10/30/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/30/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period

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10/30/2018	CA Prop 10 - G2018 Expands Local Governments' Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/30/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject ot Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$125.13	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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10/30/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$1,740.47	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$1,740.47	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$1,740.47	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$1,596.25	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
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SCHEDULE D (CONT.)

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10/30/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$1,596.25	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/30/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$8,056.87	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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11/1/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Fiona Ma - Treasurer - 2018 Candidate Name: Fiona Ma State Treasurer Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,261.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page 105 of 164

NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/1/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>106</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/1/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Affordable Housing Now - Yes on Props 1&2 coalition: Housing California, California Housing Consortium, State Building and Co Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$971.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
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 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>107</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/1/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	CA Prop 10 - G2018 Expands Local Governments&146; Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
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to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/1/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>109</u> of <u>164</u>
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/1/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject ot Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
11/1/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
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NAME OF FILER
 San Francisco Democratic County Central Committee

I.D. NUMBER
 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/1/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
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NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/1/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

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NAME OF FILER
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11/1/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$70.04	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/1/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Mailer	\$12,408.52	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Digital Outreach	\$10,000.00	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/4/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Videos, Texts & Emails	\$5,000.00	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Gavin Newsom - G2018 Candidate Name: Gavin Newsom Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Alex Padilla - SOS - 2018 Candidate Name: Alex Padilla Secretary of State Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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11/6/2018	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Fiona Ma - Treasurer - 2018 Candidate Name: Fiona Ma State Treasurer Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,261.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Xavier Becerra - G2018 Candidate Name: Xavier Becerra Attorney General Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Tony Thurmond - SPI - 2018 Candidate Name: Tony Thurmond Superintendent of Public Instruction Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$10,507.38	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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11/6/2018	Payee Name: Ricardo Lara - Insurance Comm. - 2018 Candidate Name: Ricardo Lara Insurance Commissioner Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Malia Cohen - BOE D2 - 2018 Candidate Name: Malia Cohen Board of Equalization Member District 2 Jurisdiction: Board of Equalization District	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,575.64	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: David Chiu for Assembly 2018 Candidate Name: David Chiu State Assembly Person District 17 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Phil Ting for Assembly 2018 Candidate Name: Phil Ting State Assembly Person District 19 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,921.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/6/2018	CA Prop 1 - G2018 Authorizes Bonds to Fund Specified Housing Assistance Programs. Legislative Statute. Ballot Number or Letter: 1 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,239.66	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	CA Prop 2 - G2018 Authorizes Bonds to Fund Existing Housing Program for Individuals with Mental Illness. Legislative Statute Ballot Number or Letter: 2 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$185.63	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	CA Prop 4 - G2018 Authorizes Bonds Funding Construction at Hospitals Providing Children s Health Care. Initiative Statute. Ballot Number or Letter: 4 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	CA Prop 5 - G2018 Changes Requirements for Certain Property Owners to Transfer their Property Tax Base to Replacement Property. Initiative Constitutional Amendment and Statute. Ballot Number or Letter: 5 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>117</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/6/2018	No on 6 - G2018 Eliminates Certain Road Repair and Transportation Funding. Requires Certain Fuel Taxes and Vehicle Fees be Approved by The Electorate. Initiative Constitutional Amendment Ballot Number or Letter: 6 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$10,257.43	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
11/6/2018	CA Prop 7 - G2018 Conforms California Daylight Saving Time to Federal Law. Allows Legislature to Change Daylight Saving Time Period. Legislative Statute. Ballot Number or Letter: 7 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	CA Prop 8 - G2018 Regulates Amounts Outpatient Kidney Dialysis Clinics Charge for Dialysis Treatment. Initiative Statute. Ballot Number or Letter: 8 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	CA Prop 10 - G2018 Expands Local Governments' Authority to Enact Rent Control on Residential Property. Initiative Statute. Ballot Number or Letter: 10 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$4,158.42	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 118 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/6/2018	CA Prop 11 - G2018 Requires Private-Sector Emergency Ambulance Employees to Remain On-Call During Work Breaks. Eliminates Certain Employer Liability. Initiative Statute. Ballot Number or Letter: 11 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$1,157.33	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
11/6/2018	CA Prop 12 - G2018 Establishes New Standards for Confinement of Specified Farm Animals; Bans Sale of Noncomplying Products. Initiative Statute. Ballot Number or Letter: 12 Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$1,157.33	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Jonathan Lyens for BART Board District 8 2018 Candidate Name: Jonathan Lyens Director District 8 Jurisdiction: BART Board	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$14,978.19	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Catherine Stefani for Supervisor 2018 Candidate Name: Catherine Stefani County Supervisor District 2 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$20,792.46	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/21/2018

through 12/31/2018

CALIFORNIA
FORM 460

Page 119 of 164

NAME OF FILER

San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/6/2018	Payee Name: Gordon Mar for District 4 Supervisor Candidate Name: Gordon Mar County Supervisor District 4 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$32,454.74	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Haney for Supervisor 2018 Candidate Name: Matt Haney County Supervisor District 6 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$54,467.02	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Rafael Mandelman for Supervisor 2018 General Candidate Name: Rafael Mandelman County Supervisor District 8 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,482.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Shamann Walton for Supervisor 2018 Candidate Name: Shamann Walton County Supervisor District 10 Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$13,593.36	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>120</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/6/2018	Payee Name: Alison Collins - G2018 Candidate Name: Alison Collins Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Committee to Elect Faauuga Moliga for School Board 2018 Candidate Name: Faauuga Moliga Board of Education Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$4,724.93	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Lovett for School Board 2018 Candidate Name: Li Miao Lovett Board of Education Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$5,071.10	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Re-Elect Thea Selby for the San Francisco Community College Board 2018 Candidate Name: Thea Selby Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>10/21/2018</u>		
through <u>12/31/2018</u>		Page <u>121</u> of <u>164</u>
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/6/2018	Payee Name: Brigitte Davila - G2018 Candidate Name: Brigitte Davila Community College Board Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$4,015.77	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Jeff Adachi - G2018 Candidate Name: Jeff Adachi Public Defender Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,639.71	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Payee Name: Carmen Chu for Assessor 2018 Candidate Name: Carmen Chu Assessor Jurisdiction: San Francisco, CA	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$2,985.88	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Yes on A - G2018 Embarcadero Seawall Earthquake Safety Bond Ballot Number or Letter: A Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page 122 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/6/2018	Yes on B - G2018 City Privacy Guidelines Ballot Number or Letter: B Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Yes on C - G2018 Additional Business Taxes to Fund Homeless Services Ballot Number or Letter: C Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$5,289.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Yes on D - G2018 Additional Tax on Cannabis Businesses; Expanding the Businesses Subject ot Business Taxes Ballot Number or Letter: D Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.63	\$4,114.82	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2018	Yes on E - G2018 Partial Allocation of Hotel Tax for Arts and Cultural Purposes Ballot Number or Letter: E Jurisdiction: San Francisco	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Member Communication Texts	\$185.67	\$4,114.86	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL \$285,034.77

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from 10/21/2018 through 12/31/2018		CALIFORNIA FORM 460 Page 123 of 164
I.D. NUMBER 742051		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
S.E. Owens & Company Oakland, CA 94618	PRO		\$3,465.17
Stearns Consulting San Francisco, CA 94110	CTB	Member Communication Mailer	\$51,921.79
Stearns Consulting San Francisco, CA 94110	IND	Newspaper Ad	\$1,818.72

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$399,273.36
2. Unitemized payments made this period of under \$100.	\$0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$399,273.36

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 124 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$10,546.17
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$10,218.43
Veracity Media Washington, DC 20005	CTB		Member Communication Digital Outreach	\$10,000.00
Friends of Joy Silver for Senate 2018 Palm Springs, CA 92264	CTB			\$45,000.00
Committee ID: 1397133 Hurtado for Senate 2018 Sacramento, CA 95815	CTB			\$70,000.00
Committee ID: 1401462				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 10/21/2018 through 12/31/2018		CALIFORNIA FORM 460 Page 125 of 164
I.D. NUMBER 742051		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Tom Umberg for Senate 2018 Long Beach, CA 90802	CTB			\$15,000.00
Committee ID: 1403029 Donor Stack, LLC Oakland, CA 94618	WEB			\$1,765.05
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$14,179.04
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$11,031.11
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$1,593.59

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 10/21/2018 through 12/31/2018		CALIFORNIA FORM 460 Page 126 of 164
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$10,690.65
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$16,776.71
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$10,517.45
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$10,294.11
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$12,004.29

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 127 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$20,474.94
Stearns Consulting San Francisco, CA 94110	CTB		Member Communication Mailer	\$10,418.90
Veracity Media Washington, DC 20005	CTB		Member Communication Videos, Texts & Emails	\$5,000.00
Nate Allbee San Francisco, CA 94110	CTB			\$3,000.00
Veracity Media Washington, DC 20005	CTB		Member Communication Videos, Texts & Emails	\$7,053.98

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 128 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107	SAL			\$4,911.20
Committee ID: C00392928				
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107	SAL			\$176.26
Committee ID: C00392928				
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107	OFC			\$240.65
Committee ID: C00392928				
S.E. Owens & Company Oakland, CA 94618	PRO			\$5,000.00
S.E. Owens & Company Oakland, CA 94618	PRO			\$8,767.86

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 129 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107	SAL			\$2,501.37
Committee ID: C00392928				
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107	SAL			\$4,085.89
Committee ID: C00392928				
ActBlue Technical Services Cambridge, MA 02138	FND			\$197.50
San Francisco Study Center San Francisco, CA 94103	CVC			\$5,000.00
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107	SAL			\$2,532.97
Committee ID: C00392928				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 130 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107 Committee ID: C00392928	MTG			\$992.89
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107 Committee ID: C00392928	OFC			\$229.88
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107 Committee ID: C00392928	WEB			\$98.75
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107 Committee ID: C00392928	SAL			\$2,542.84
City and County of San Francisco San Francisco, CA 94102 Committee ID: C00392928	FIL			\$140.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 131 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Secretary of State Sacramento, CA 95814			Annual Fee	\$50.00
S.E. Owens & Company Oakland, CA 94618	PRO			\$5,699.65
Donor Stack, LLC Oakland, CA 94618	WEB			\$410.75
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107	MTG			\$2,266.32
Committee ID: C00392928 San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107	OFC			\$300.28
Committee ID: C00392928				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 132 of 164
NAME OF FILER San Francisco Democratic County Central Committee		I.D. NUMBER 742051

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107	POS			\$23.24
Committee ID: C00392928				
San Francisco Democratic Central Committee (Federal) San Francisco, CA 94107	WEB			\$334.96
Committee ID: C00392928				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$399,273.36

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period
from 10/21/2018
through 12/31/2018

CALIFORNIA
FORM 460

Page 133 of 164

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Stearns Consulting San Francisco, CA 94110	CTB Member Communication Mailer	\$51,921.79	\$0.00	\$51,921.79	\$0.00
Stearns Consulting San Francisco, CA 94110	IND Newspaper Ad	\$1,818.72	\$0.00	\$1,818.72	\$0.00
Stearns Consulting San Francisco, CA 94110	CTB Member Communication Mailer	\$10,218.43	\$0.00	\$10,218.43	\$0.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** \$13,030.69
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** \$77,970.28
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** (\$64,939.59)
May be a negative number.

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F (CONT.)

Statement covers period
from 10/21/2018
through 12/31/2018

**CALIFORNIA
FORM 460**

Page 134 of 164

NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
S.E. Owens & Company Oakland, CA 94618	PRO	\$3,465.17	\$0.00	\$3,465.17	\$0.00
Stearns Consulting San Francisco, CA 94110	CTB Member Communication Mailer	\$10,546.17	\$0.00	\$10,546.17	\$0.00
Cornerstone Printing San Francisco, CA 94111	CTB Member Communication Mailer	\$0.00	\$5,743.57	\$0.00	\$5,743.57
Cornerstone Printing San Francisco, CA 94111	CTB Member Communication Mailer	\$0.00	\$6,256.43	\$0.00	\$6,256.43

SUBTOTALS

Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from 10/21/2018 through 12/31/2018	CALIFORNIA FORM 460 Page 135 of 164 I.D. NUMBER 742051
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NAME OF FILER
San Francisco Democratic County Central Committee

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Olson, Hagel, & Fishburn, LLP Sacramento, CA 95814-4602	PRO	\$0.00	\$865.69	\$0.00	\$865.69
Olson, Hagel, & Fishburn, LLP Sacramento, CA 95814-4602	PRO	\$0.00	\$165.00	\$0.00	\$165.00
SUBTOTALS		\$77,970.28	\$13,030.69	\$77,970.28	\$13,030.69

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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through	12/31/2018	Page 136 of 164

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Precise Mailing

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster San Francisco, CA 94124	CTB		Member Communication Mailer Postage	\$6,658.78
US Postmaster San Francisco, CA 94124	CTB		Member Communication Mailer Postage	\$1,976.24
US Postmaster San Francisco, CA 94124	CTB		Member Communication Mailer Postage	\$2,860.52
US Postmaster San Francisco, CA 94124	CTB		Member Communication Mailer Postage	\$2,144.22

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$13639.76

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Precise Mailing

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster San Francisco, CA 94124	CTB		Member Communication Mailer Postage	\$1,951.23
US Postmaster San Francisco, CA 94124	CTB		Member Communication Mailer Postage	\$2,850.00
US Postmaster San Francisco, CA 94124	CTB		Member Communication Mailer Postage	\$3,647.31

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$8448.54

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Francisco Democratic Central Committee (Federal)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
State Compensation Insurance Fund Pleasanton, CA 94588	SAL			\$126.60
IDM Payroll Solutions Walnut Creek, CA 94596	SAL			\$228.80
IDM Payroll Solutions Walnut Creek, CA 94596	SAL			\$238.67
Manny's San Francisco, CA 94103	MTG			\$686.32

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1280.39

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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through	12/31/2018	Page 139 of 164

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Francisco Democratic Central Committee (Federal)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Adam Mehis San Francisco, CA 94114	SAL			\$2,304.17
Adam Mehis San Francisco, CA 94114	SAL			\$2,304.17
Adam Mehis San Francisco, CA 94114	SAL			\$3,733.34
Adam Mehis San Francisco, CA 94114	SAL			\$2,304.17

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$10645.85

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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through	12/31/2018	Page 140 of 164

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Francisco Democratic Central Committee (Federal)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Adam Mehis San Francisco, CA 94114	SAL			\$2,304.17
Adam Mehis San Francisco, CA 94114	SAL			\$2,304.17
Nationbuilder Los Angeles, CA 90013	WEB			\$117.71
Public Storage San Francisco, CA 94107	OFC			\$182.49

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$4908.54

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

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NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Francisco Democratic Central Committee (Federal)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Public Storage San Francisco, CA 94107	OFC			\$182.49
Public Storage San Francisco, CA 94107	OFC			\$182.49
IDM Payroll Solutions Walnut Creek, CA 94596	SAL			\$352.55
IDM Payroll Solutions Walnut Creek, CA 94596	SAL			\$176.26

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$893.79

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IDM Payroll Solutions Walnut Creek, CA 94596	SAL			\$176.26
Don Ramon's Mexican Restaurante San Francisco, CA 94103	MTG			\$857.15
AT&T Sacramento, CA 95887	OFC			\$117.79
AT&T Sacramento, CA 95887	OFC			\$58.16

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TOTAL* \$1209.36

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Schedule G

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Thomas Ammiano San Francisco, CA 94110-	MTG			\$1,580.00
IDM Payroll Solutions Walnut Creek, CA 94596	SAL			\$197.20

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TOTAL* \$1777.20

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Board of Equalization San Francisco, CA 94105	CTB		Member Communication Mailer Sales Tax	\$374.45
Board of Equalization San Francisco, CA 94105	CTB		Member Communication Mailer Sales Tax	\$285.49
Board of Equalization San Francisco, CA 94105	CTB		Member Communication Mailer Sales Tax	\$272.02
Board of Equalization San Francisco, CA 94105	CTB		Member Communication Mailer Sales Tax	\$124.84

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TOTAL* \$1056.80

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Schedule G

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Board of Equalization San Francisco, CA 94105	CTB		Member Communication Mailer Sales Tax	\$304.11
Board of Equalization San Francisco, CA 94105	CTB		Member Communication Mailer Sales Tax	\$269.65
Board of Equalization San Francisco, CA 94105	CTB		Member Communication Mailer Sales Tax	\$285.22
Board of Equalization San Francisco, CA 94105	CTB		Member Communication Mailer Sales Tax	\$338.58

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TOTAL* \$1197.56

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Board of Equalization San Francisco, CA 94105	CTB		Member Communication Mailer Sales Tax	\$629.84
Katherine Loh Brisbane, CA 94005	CTB		Member Communication Mailer Translation & Typesetting	\$500.00
Katherine Loh Brisbane, CA 94005	CTB		Member Communication Mailer Translation & typesetting	\$500.00
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Mailhouse	\$829.80

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TOTAL* \$2459.64

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Postage	\$3,674.31
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Mailhouse	\$644.18
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Postage	\$2,850.00
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Mailhouse	\$800.00

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TOTAL* \$7968.49

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Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Postage	\$2,428.40
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Mailhouse	\$1,392.38
Precise Mailing South San Francisco, CA 94080	POS		Member Communication Mailer Postage	\$5,950.00
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Mailhouse	\$625.00

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TOTAL* \$10395.78

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Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Postage	\$1,951.23
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Mailhouse	\$645.00
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Postage	\$2,144.22
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Mailhouse	\$725.00

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TOTAL* \$5465.45

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Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Postage	\$1,976.24
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Mailhouse	\$742.00
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Postage	\$2,860.52
Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Mailhouse	\$1,554.42

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TOTAL* \$7133.18

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Precise Mailing South San Francisco, CA 94080	CTB		Member Communication Mailer Postage	\$6,658.78
SF Van, LLC San Francisco, CA 94102	CTB		Member Communication Mailer Data	\$689.16
SF Van, LLC San Francisco, CA 94102	CTB		Member Communication Mailer Data	\$378.48
SF Van, LLC San Francisco, CA 94102	CTB		Member Communication Mailer Data	\$373.60

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TOTAL* \$8100.02

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SCHEDULE G

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NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Stearns Consulting

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SF Van, LLC San Francisco, CA 94102	CTB		Member Communication Mailer Data	\$831.04
SF Van, LLC San Francisco, CA 94102	CTB		Member Communication Mailer Data	\$344.88
SF Van, LLC San Francisco, CA 94102	CTB		Member Communication Mailer Data	\$329.88
SF Van, LLC San Francisco, CA 94102	CTB		Member Communication Mailer Data	\$355.80

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1861.60

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

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San Francisco Democratic County Central Committee

I.D. NUMBER
742051

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SF Van, LLC San Francisco, CA 94102	CTB		Member Communication Mailer Data	\$440.08
SF Van, LLC San Francisco, CA 94102	CTB		Member Communication Mailer Data	\$1,036.28
Spotlight San Francisco, CA 94103-	CTB		Member Communication Mailer Printing	\$2,060.00
Spotlight San Francisco, CA 94103-	CTB		Member Communication Mailer Delivery	\$250.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$3786.36

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
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San Francisco Democratic County Central Committee

I.D. NUMBER
742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Stearns Consulting

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
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* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Spotlight San Francisco, CA 94103-	CTB		Member Communication Mailer Printing	\$1,980.00
Spotlight San Francisco, CA 94103-	CTB		Member Communication Mailer Delivery	\$80.00
Spotlight San Francisco, CA 94103-	CTB		Member Communication Mailer Printing	\$1,925.00
Spotlight San Francisco, CA 94103-	CTB		Member Communication Mailer Delivery	\$150.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$4135.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
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SCHEDULE G

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742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Stearns Consulting

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
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* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Spotlight San Francisco, CA 94103-	CTB		Member Communication Mailer Delivery	\$150.00
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer	\$1,250.00
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Printing	\$2,515.00
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Printing	\$2,300.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$6215.00

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
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SCHEDULE G

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742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Delivery	\$250.00
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Printing	\$1,970.00
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Delivery	\$250.00
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Printing	\$2,100.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$4570.00

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
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San Francisco Democratic County Central Committee

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Delivery	\$250.00
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Printing	\$2,450.00
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Delivery	\$250.00
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Printing	\$4,770.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$7720.00

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
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SCHEDULE G

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San Francisco Democratic County Central Committee

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742051

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Spotlight Design & Printing San Francisco, CA 94107	CTB		Member Communication Mailer Delivery	\$250.00
Zebra Graphics San Francisco, CA 94103	CTB		Member Communication Mailer Prepress	\$500.00
Zebra Graphics San Francisco, CA 94103	CTB		Member Communication Mailer Prepress	\$500.00
Zebra Graphics San Francisco, CA 94103	CTB		Member Communication Mailer Prepress	\$425.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1675.00

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FPPC Form 460 (June/01)
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Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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SCHEDULE G

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San Francisco Democratic County Central Committee

I.D. NUMBER
742051

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Zebra Graphics San Francisco, CA 94103	CTB		Member Communication Mailer Prepress	\$500.00
Zebra Graphics San Francisco, CA 94103	CTB		Member Communication Mailer Prepress	\$400.00
Zebra Graphics San Francisco, CA 94103	CTB		Member Communication Mailer Graphics	\$400.00
Zebra Graphics San Francisco, CA 94103	CTB		Member Communication Mailer Prepress	\$400.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1700.00

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FPPC Form 460 (June/01)
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Schedule G

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SCHEDULE G

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NAME OF AGENT OR INDEPENDENT CONTRACTOR
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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Zebra Graphics San Francisco, CA 94103	CTB		Member Communication Mailer Prepress	\$500.00
Zebra Graphics San Francisco, CA 94103	CTB		Member Communication Mailer Prepress	\$500.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1000.00

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
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SCHEDULE G

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NAME OF FILER
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I.D. NUMBER
742051

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Veracity Media

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Relay Media Palo Alto, CA 94306	CTB		Member Communication Videos, Texts & Emails	\$5,878.31

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$5878.31

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
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SCHEDULE H

Statement covers period
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742051

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		SUBTOTALS						

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

1. Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)

2. Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)

3. Net change this period. (Subtract Line 2 from Line 1.)
(Enter the net here and on the Summary Page, Column A, Line 7.)

NET (May be a negative number)

** If Required

Schedule I

Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period
from 10/21/2018
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Francisco Democratic County Central Committee

I.D. NUMBER
742051

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$.00

Schedule I Summary

- Increases to cash of \$100 or more this period..... \$.00
- Unitemized increases to cash under \$100 this period..... \$.00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$.00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$.00

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Memo Reference: INC34899

Contribution earmarked and received through ActBlue 14 Arrow Street, Suite 11 Cambridge, MA 02138. PAC limit not affected.